



**SUNOCO PARTNERS
MARKETING & TERMINALS**
An ENERGY TRANSFER Partnership

2

CERTIFIED MAIL: 7016 0340 0000 1757 6371

November 20, 2017

Delaware Department of Natural Resources and Environmental Control
Air Quality Management
100 West Water Street, Suite 6A
Dover, DE 19904

**RE: Sunoco Partners Marketing & Terminals L.P. – Marcus Hook Industrial Complex
CY 2018 Asbestos Notification of Demolition or Renovation
40 CFR 61.145
DE Air Pollution Regulation Title 7 Chapter 1121, Section 10**

Dear Sir or Madam,

In accordance with the above-referenced regulations, attached herein is a notification for the 2018 calendar year of routine asbestos renovation/demolition activities that are anticipated to occur at the Sunoco Partners Marketing & Terminals L.P. – Marcus Hook Industrial Complex in areas located in Claymont, DE.

Should you have any questions regarding this notification, please contact me at (610) 859-1279.

Sincerely,

Kevin W. Smith
Specialist – Environmental Compliance

R E C E I V E D
NOV 24 2017

Cc: Asbestos – NESHAP Coordinator (3WC32)
United States Environmental Protection Agency – Region III
1650 Arch St.
Philadelphia, PA
19103-2029

**Pesticides & Asbestos Programs
and Enforcement Branch (3LC62)
EPA Region III**

RECEIVED
NOV 24 1964

Postmaster: Please do not
change the address of this
subscription.

NOTIFICATION OF DEMOLITION OR RENOVATION						DNREC USE, ONLY	
I. FACILITY INFORMATION (<i>Identify Owner, Removal Contractor, and Certified Professional Service Firm</i>)							
Owner Sunoco Partners Marketing & Terminals L.P.							
Address 100 Green Street							
City Marcus Hook		County Delaware		State PA	Zip 19061		
Contact Kevin Smith				Telephone 610-859-1279			
REMOVAL CONTRACTOR Brand Energy Services, LLC							
Address 740 Veterans Drive							
City Swedesboro		County Gloucester		State NJ	Zip 08085		
Site Contact (<i>Supervisor on-site</i>) Joe Kirchoff				Telephone 267-980-7482			
CERTIFIED PROFESSIONAL SERVICE FIRM Total Environmental Solutions							
Address 1005 St Georges Lane							
City Landenberg		County		State PA	Zip 19350		
Site Contact Eddie Iglesias				Telephone 302-344-4217			
II. TYPE OF NOTIFICATION? ("O" = "Original" — "R" = "Revised")						O	
III. TYPE OF OPERATION? ("D" = "Demolition" — "R" = "Renovation")						R	
IV. IS ASBESTOS PRESENT? ("Y" = "YES" — "N" = "NO")						Y	
V. FACILITY DESCRIPTION (<i>Include Building Name, number and floor, or room number</i>)							
Building Name Sunoco Partners Marketing & Terminals L.P. - Marcus Hook Industrial Complex							
Address #1 100 Green Street (portion of facility located in New Castle County, Delaware)							
Address #2							
City Claymont		County New Castle		State DE	Zip 19703		
Site Location Ethylene Complex							
Building Size: Sq. Meters				Sq. Feet	Number of Floors	Age in Years	
Present Use				Prior Use			
VI. PROCEDURE, INCLUDING ANALYTICAL METHOD, IF APPROPRIATE, USED TO DETECT THE PRESENCE OF ASBESTOS MATERIAL (Note: all demolition jobs must have a Survey performed by a Certified Professional Service Firm to ensure that there are no Asbestos-Containing Materials ("ACM") present) (<i>Definition: Asbestos-Containing Materials ("ACM"): containing > 1% asbestos</i>) PLM Analysis will be conducted or assumption will be made material is a ACM							
VII. APPROXIMATE AMOUNT OF REGULATED ASBESTOS-CONTAINING MATERIAL ("RACM") TO BE REMOVED, AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED (Specify the amount of asbestos below):							
VII. APPROXIMATE AMOUNT OF REGULATED ASBESTOS-CONTAINING MATERIAL ("RACM") TO BE REMOVED, AND NON-FRIABLE ASBESTOS MATERIAL THAT WILL NOT BE REMOVED (Specify the amount of asbestos below):						NON-FRIABLE ASBESTOS MATERIAL NOT TO BE REMOVED	
				RACM TO BE REMOVED	CATEGORY I	CATEGORY II	
PIPES: Linear Feet				2000			
PIPES: Linear Meters							
SURFACE AREA: Square Feet							
SURFACE AREA: Square Meters				2000			
Volume of RACM, off-Facility Components: Cubic Feet							
Volume of RACM, off-Facility Components: Cubic Meters							
III. SCHEDULED DATES OF ASBESTOS REMOVAL/DEMOLITION/RENOVATION?					Start 01/01/2018		Finish 12/31/2018
IX. SCHEDULED WORKING HOURS (SHIFT HOURS) (A.M./P.M./etc.)					Start 12:00 am		Finish 11:59 pm

NOTIFICATION OF DEMOLITION OR RENOVATION.....(continued)

X. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(s) TO BE USED
ACM to be removed in support of maintenance operations

XI. DESCRIPTION OF ENGINEERING CONTROLS AND WORK PRACTICES TO BE USED TO CONTROL EMISSIONS OF ASBESTOS
AT THE DEMOLITION OR RENOVATION SITE ACM will be removed in accordance with the Glovebag Method or a method of containment as required, and placed into two six millimeter bags. ACM will be disposed of at an EPA certified facility.

XII. WASTE TRANSPORTER #1 Republic Services of Philadelphia

Address 3000 Hedley Street

City Philadelphia County Philadelphia State PA Zip 19137

Contact Anita Toney Telephone -2153054977

WASTE TRANSPORTER #2

Address

City County State Zip

Contact Telephone

XII. WASTE DISPOSAL SITE Conestoga Landfill EPA Certification Number 101509

Address 420 Quarry Road

City Morgantown County Berks State PA Zip 19543

Contact James Kuhn Telephone 7172464640

XIV. IF THE DEMOLITION WAS ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW:

Name N/A Title N/A

Authority N/A

Date of Order (MM/DD/YY) N/A Date Ordered to Begin (MM/DD/YY) N/A

XV. FOR EMERGENCY RENOVATIONS: N/A

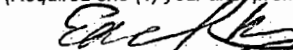
Date and HOUR of Emergency: (MM/DD/YY) N/A (HH:MM) N/A

Description of SUDDEN, UNEXPECTED EVENT N/A

Explanation of how the Event caused unsafe conditions, or a serious disruption of industrial operations N/A


XVI. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND, OR THAT PREVIOUSLY NON FRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED OR REDUCED TO POWDER Material will be managed as ACM in accordance with applicable regulations.

XVII. I CERTIFY THAT AN INDIVIDUAL, TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR, PART 61, SUBPART M WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION, AND THAT EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS
(Required one (1) year after promulgation).


(Signature of Owner/Operator)

11/20/17
(Date)

XVIII. I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT


(Signature of Owner/Operator)

11/20/17
(Date)



**SUNOCO PARTNERS
MARKETING & TERMINALS**
An ENERGY TRANSFER Partnership

CERTIFIED MAIL: 7016 0340 0000 1757 6364

November 20, 2017

Asbestos Notification
DEP Bureau of Air Quality
P. O. Box 8468
Harrisburg, PA 17105-8468

R E C E I V E D
NOV 24 2017

**Pesticides & Asbestos Programs
and Enforcement Branch (3LC62)
EPA Region III**

**RE: Sunoco Partners Marketing & Terminals L.P. – Marcus Hook Industrial Complex
CY 2018 Asbestos Notification of Demolition or Renovation
40 CFR 61.145 Subpart M
PA Title 25 Chapter 124**

Dear Sir or Madam,

In accordance with the above-referenced regulations, attached herein is a notification for the 2018 calendar year of routine asbestos renovation/demolition activities that are anticipated to occur at the Sunoco Partners Marketing & Terminals, L.P. – Marcus Hook Industrial Complex.

Should you have any questions regarding this notification, please contact me at (610) 859-1279.

Sincerely,

Kevin W. Smith
Specialist – Environmental Compliance

Cc: Asbestos – NESHAP Coordinator (3WC32)
United States Environmental Protection Agency – Region III
1650 Arch St.
Philadelphia, PA
19103-2029

RECEIVED
NOV 24 1967

THE REGIONAL
AND DISTRICT OFFICES
OF THE FEDERAL BUREAU OF INVESTIGATION
AND THE U.S. DEPARTMENT OF JUSTICE



pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

ASBESTOS ABATEMENT AND DEMOLITION/RENOVATION NOTIFICATION FORM

For Official Use Only

Postmark Date: _____

Project ID#: _____

Permit #: _____

Other #: _____

Inspector: _____

Date Received 1

Date Received 2

R E C E I V E D
NOV 24 2017

Pesticides & Asbestos Programs
and Enforcement Branch (SL062)
EPA Region III

NOTICE: This is not a valid asbestos abatement notification for the purposes of the Asbestos Occupations Accreditation and Certification Act unless individuals and contractors have met the certification requirements as set forth in the Asbestos Occupations Accreditation and Certification Act, Act of 1990, P.L. 805, No. 194 (63 P.S. Sections 2101-2112).

REFER TO THE ATTACHED INSTRUCTIONS FOR INFORMATION AND REQUIREMENTS.

1. TYPE OF NOTIFICATION (check one):		<input type="checkbox"/> Initial	<input checked="" type="checkbox"/> Annual Notification
<input type="checkbox"/> Revision (highlight here, and changes)		<input type="checkbox"/> Phase of Annual Notification	
<input type="checkbox"/> Postponement		<input type="checkbox"/> Cancellation	
Date of Initial Notification or, if previously revised, date of last revision: _____			
2. PROJECT LOCATION (check one):			
<input type="checkbox"/> Allegheny County		<input type="checkbox"/> City of Philadelphia	<input checked="" type="checkbox"/> Other Location in PA (specify county): <u>Delaware County</u>
3. For Allegheny County and City of Philadelphia projects only:			
A. Does this project require a permit? <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes is checked, a permit application must be submitted along with this notification and approved prior to the start of the project.)			
B. For City of Philadelphia projects requiring a permit:			
Asbestos project inspector: _____		Certification #: _____	
Company name: _____			
Address: _____			
City: _____		State: _____	Zip: _____ Phone: _____
4. WILL ALTERNATIVE METHODS TO ANY OF THE APPLICABLE REGULATIONS BE USED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(If Yes is checked, approval must be obtained prior to the start of the project. Please contact the appropriate DEP regional office or local government agency (see reverse of Instruction Sheet for contact list).			
5. TYPE OF OPERATION (check one):		<input type="checkbox"/> Abatement prior to Demolition	
<input type="checkbox"/> Demolition	<input type="checkbox"/> Ordered Demolition	<input checked="" type="checkbox"/> Renovation	<input type="checkbox"/> Emergency Renovation
FACILITY DESCRIPTION:		Job No.: _____ (see instructions)	
Facility Name: <u>Sunoco Partners Marketing & Terminals L.P. - Marcus Hook Industrial Complex</u>			
Street/Rural Address: <u>100 Green Street</u>			
City: <u>Marcus Hook</u>		State: <u>PA</u>	Zip Code: <u>19061</u>
Present use: <u>Terminal</u>		Prior use: _____	
Will the facility be occupied during the abatement activity? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Facility size in square feet: <u>approx. 781 acres</u>		# of floors: _____	Age in years: <u>51+</u>
ABATEMENT CONTRACTOR:			
Company name: <u>Brand Energy Services, LLC</u>			
Allegheny County or City of Philadelphia License # (if applicable): _____			
Street/Rural/POB Address: <u>740 Veterans Drive</u>			
City: <u>Swedesboro</u>		State: <u>NJ</u>	Zip: <u>08085</u>
Contact: <u>Joe Kirchoff</u>		Telephone No. (between 8:00 & 4:30): <u>267-980-7482</u>	

3 1 1 3 3 3
TUE 12 00PM

Emergency release & removal of
SBO (1) from the reactor has
been completed.

8. DEMOLITION CONTRACTOR:

Company name: _____
 Street/Rural/POB Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Telephone No. (between 8:00 & 4:30): _____

9. FACILITY OWNER:

Owner name: Sunoco Partners Marketing & Terminals L.P.
 Street/Rural/POB Address: 100 Green Street
 City: Marcus Hook State: PA Zip: 19061
 Contact: Kevin Smith Telephone No. (between 8:00 & 4:30): 610-859-1279

10. FACILITY INSPECTION (required for renovation and demolition projects):

Building inspector: Roy Mosaicant Certification # 107
 Date of inspection: _____ Is any material assumed to be asbestos? ☒ Yes ☐ No
 Procedure, including analytical method, if appropriate, used to detect the presence of asbestos material:
PLM analysis will be utilized or material will be assumed to be asbestos.

☐ Building is ID and in danger of collapse. An asbestos investigator will be on site during demolition. (Philadelphia only)

11. IS ANY TYPE OF ASBESTOS PRESENT ☒ Yes ☐ No If Yes, please list in #12

12. TYPE OF ACM, DESCRIPTION & LOCATION OF MATERIAL, APPROXIMATE AMOUNT OF ACM, TYPE OF ABATEMENT AND FINAL AIR CLEARANCE METHOD.

PROVIDE INFORMATION IN THE SPACES BELOW, THEN CONTINUE ON ANOTHER SHEET, IF NECESSARY, USING THE SAME FORMAT.

Code *	Description of material	Location of material (room/floor/area)	Amount of ACM	Code **	Code ***	Code ****
RI	Thermal Insulation Systems	Marcus Hook Industrial Complex	5000	LF	REM	N/A
RI	Thermal Insualtion Systems	Marcus Hook Industrial Complex	2000	SF	REM	N/A

Code *	Code **	Code ***	Code ****
Type of ACM	Units	Type of abatement	Final Clearance
RI - Friable ACM	LF - Linear ft.	REM - Removal	PCM - Phase contrast microscopy
F1 - Cat I nonfriable ACM	SF - Square ft.	CAP - Encapsulation	TEM - Transmission electron microscopy
F2 - Cat II nonfriable ACM	CF - Cubic ft.	CLO - Enclosure	
Note: Allegheny County treats all ACM as friable)		NON - None	

3. Is this project regulated by NESHAP ☒ Yes ☐ No

A project that includes the demolition of any defined "facility" is regulated by NESHAP. A renovation project is also regulated by NESHAP when the amounts of friable ACM, or ACM that may be rendered friable, are as follows: 260 LF or 160 SF or 35 CF.

14. OPERATION SCHEDULE(S) (as applicable)

A. Asbestos abatement:

Start Date: 01/01/2018

Completion Date: 12/31/2018

Daily hours of operation: 12:00 ☒ am ☐ pm to 11:59 ☐ am ☒ pm

Days of week (check) ☒ Mo ☒ Tu ☒ We ☒ Th ☒ Fr ☒ Sa ☒ Su

B. Demolition:

Start Date:

Completion Date:

Daily hours of operation: ☐ am ☐ pm to ☐ am ☐ pm

Days of week (check) ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su

C. Renovation:

Start Date:

Completion Date:

Daily hours of operation: ☐ am ☐ pm to ☐ am ☐ pm

Days of week (check) ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su

COMMENTS:

15. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:

Routine scheduled and unscheduled maintenance throughout the industrial complex

16. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO REMOVE ACM AND TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

Material will be removed while utilizing the Glovebag Method or a modified containment as required. The material will be place into two six millimeter bags and be properly disposed of at an EPA certified landfill.

7. WASTE TRANSPORTER(S)

A. Transporter #1 name: Republic Services of Philadelphia

Street/Rural Address: 3000 Hedley Street

City: Philadelphia State: PA Zip: 19137

Contact: Anita Toney Telephone: 215-305-4977

B. Transporter #2 name:

Street/Rural Address:

City: State: Zip:

Contact: Telephone:

18. WASTE DISPOSAL SITE(S): (any asbestos containing material)

- A. Landfill name: Conestoga Landfill DEP permit #: 101509
 Street/Rural Address: 420 Quarry Road
 City: Morgantown State: PA Zip: 19543
 Contact: James Kuhn Telephone: 717-246-4640
- B. Landfill name: Modern Landfill DEP permit #: 100113
 Street/Rural Address: 4400 Mount Pisgah Road
 City: York State: PA Zip: 17402
 Contact: James Kuhn Telephone: 717-246-4640

19. AIR MONITORING FIRM(S)

- A. Company name/individual: Total Environmental Solutions
 Street/Rural Address: 1005 St Georges Lane
 City: Landenberg State: PA Zip: 19350
 Contact: Eddie Iglesias Telephone: 302-344-4217
- B. Final clearance firm: (if different than 19A) _____
 Street/Rural Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Telephone: _____
- Final clearance firm was hired by (check one) ☐ Contractor ☐ Owner
☐ Other Explain _____

20. AIR SAMPLE FIRM(S) (City of Philadelphia projects only)

- A. PCM company name/individual: _____ Certification #: _____
 Street/Rural Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Telephone: _____
- B. TEM company name: _____ Certification #: _____
 Street/Rural Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Telephone: _____

1. FOR EMERGENCY RENOVATIONS:

Date of emergency (mm/dd/yy): _____ Hour of emergency: _____ ☐ am ☐ pm
 Description of the sudden, unexpected event:

Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden as a consequence of complying with the 10 working day notification requirement:

22. FOR ORDERED DEMOLITIONS (attach copy of order):
Government agency that ordered: _____
Name of individual who ordered: _____ Title: _____
Date of order (mm/dd/yy): _____ Date ordered to begin (mm/dd/yy): _____

23. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:

24. PENNSYLVANIA CERTIFICATIONS/LICENSES:
Project designer: _____ Certification #: _____
Contractor (Individual): _____ Certification #: _____
Supervisor: Joey Kirchoff Certification #: C0602A
Contractor (Firm): Brand Energy Services, LLC Certification #: C0602A


***** SIGN BOTH STATEMENTS *****

25. I HEREBY CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF 40 CFR PART 61 SUBPART M (if applicable) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING ALL WORKING HOURS, AND I CERTIFY THAT ALL WORK WILL BE DONE IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL AGENCY RULES AND REGULATIONS.

(Original Signature of Owner/Operator) (Date)

Printed Name of Owner/Operator: Edward G. Human Title: Director Marcus Hook Operations

26. I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS AND THE INFORMATION CONTAINED IN THIS NOTIFICATION FORM ARE TRUE. THIS CERTIFICATION IS MADE SUBJECT TO THE PENALTIES SET FORTH IN 18 PA C.S. §4904 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.



(Original Signature of Owner/Operator) 11/20/17
(Date)

Printed Name of Owner/Operator: Edward G. Human Title: Director Marcus Hook Operations

FOR OFFICIAL USE ONLY



ENERGY TRANSFER PARTNERS

Marcus Hook Industrial Complex
100 Green Street
Marcus Hook, PA 19061



Asbestos - NESHAP Coordinator (3WC32)
USEPA Region III
1650 Arch St.
Philadelphia, PA 19103-2029

